

Filing deadline: _____

Part 1: Complete the following information

Please type or print

First name _____ MI _____ Last name _____
 Mailing address _____
 City _____ State _____ ZIP _____

Social Security no. _____

Date of birth _____ / _____ / _____
 Month Day Year

Phone (____) _____

- 1 I am applying for the senior citizens assessment freeze homestead exemption for the property located at

Street address _____

Township _____

City _____, IL

County _____

- 2 Write the property index number (PIN) of the property listed above. Your PIN is listed on your property tax bill, or you may obtain it from the chief county assessment officer. _____
 Write the legal description **only** if you are unable to obtain your PIN. _____

- 3 Have you, or your spouse, previously received a senior citizens assessment freeze homestead exemption on this property?

☐ Yes ☐ No

- 4 If so, write the base year, if known. _____

- 5 If your spouse maintains a separate residence, has he or she applied for this exemption?

☐ Yes ☐ No**Part 2: Complete the 2003 income information for the entire household**

You must include the income of the entire household on each line.

- 1 Social Security, SSI benefits. Include Medicare deductions in this total (**household total**).
 2 Railroad Retirement benefits. Include Medicare deductions in this total (**household total**).
 3 Civil Service benefits (**household total**).
 4 Annuity benefits and federally taxable pension and IRA benefits.
See instructions for Line 4 (household total).
 5 Human Services and other governmental cash public assistance benefits (**household total**).
 6 Wages, salaries, and tips from work (**household total**).
 7 Interest and dividends received (**household total**).
 8 Net rental, farm, and business income or (loss). *See instructions for Line 8 (household total).*
 9 Net capital gain or (loss). *See instructions for Line 9 (household total).*
 10 Other income or (loss). *See instructions for Line 10 (household total).*
 11 Add Lines 1 through 10.
 12 Certain subtractions. You may subtract only the reported adjustments to income totaled on U.S. 1040, Line 33 or U.S. 1040A, Line 20.

1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____
11	_____

Subtraction item	Amount
12a _____	_____
12b _____	_____

Add the amounts on Lines 12a and 12b, and write the result.

12 _____

- 13 Subtract Line 12 from Line 11, and write the result. This is your total household income for 2003. If this amount is greater than \$40,000, **STOP**. You do not qualify for this exemption.

13 _____

Continue to the back.

Do not write in this space.

Date received _____
 Application number _____
 Base year _____
 Revised base year _____
 Approved ☐ Yes ☐ No

Income verified _____
 Base year EAV \$ _____
 Revised base year EAV \$ _____
 EAV of added improvements \$ _____
 Base amount \$ _____

☐ Yes ☐ No

Part 3: Complete this affidavit

Sworn under oath, I state that

- 1 On January 1, 2004, the property listed in Part 1, Line 1, was improved with a permanent structure that was
- used as my principal residence, **or**
 - a residence on which I have previously received this exemption before becoming a resident of a nursing home **and** the residence is unoccupied or is used as the principal residence of my spouse.

- 2 On January 1, 2004, for the property listed in Part 1, Line 1,
- I was the owner of record for the property; **or**
 - I had a legal or equitable interest in the property by a written instrument; **or**
 - I had a leasehold interest in the property that was used as a single-family residence.

Note If I have not received this exemption previously for this property, I also meet the eligibility requirements listed in Items 1 and 2 for this property on January 1, 2003.

- 3 In 2004, I am or will be 65 years of age or older, or my spouse, who died in 2004, would have been 65 years of age or older. If my spouse died in 2004,

3a The name of my deceased spouse was _____

3b The Social Security number of my deceased spouse was _____

3c The date of birth of my deceased spouse was _____

Month / Day / Year

3d The date of death of my deceased spouse was _____

Month / Day / Year

- 4 I am liable for paying real property taxes on the property listed in Part 1, Line 1.

- 5 I have not applied for a senior citizens assessment freeze homestead exemption for any other property for 2004.

- 6 The total household income for 2003 is shown in Part 2, Line 13, and is \$40,000 or less.

- 7 On January 1, 2004, in addition to myself, the following individuals used the property listed in Part 1, Line 1, for their principal residence. My spouse is included if he or she used the property as his or her principal dwelling place on January 1, 2004. The income of the individuals listed below is included in Part 2. Attach an additional sheet if necessary.

First and last name

Social Security number

7a	_____	_____	_____	_____
7b	_____	_____	_____	_____
7c	_____	_____	_____	_____
7d	_____	_____	_____	_____

- 8 On January 1, 2004, I was (check one) ☐ single ☐ married ☐ divorced ☐ separated ☐ widowed

8a If married, the name of my spouse is _____

8b The address of my spouse, if different than the property address listed in Part 1, Line 1, is

Street address

City

State

ZIP

Under penalties of perjury, I state that, to the best of my knowledge, the information contained in this affidavit is true, correct, and complete.

Signature of applicant

Date

Subscribed and sworn to before me this

____ day of _____, 200____.

Notary public

Mail your completed Form PTAX-340 to:

If you have any questions, please call:

____ County Chief County Assessment Officer

(____) _____

Mailing address

Form PTAX-340 General Information

What is the Senior Citizens Assessment Freeze Homestead Exemption?

The senior citizens assessment freeze homestead exemption (35 ILCS 200/15-172) allows qualified senior citizens to elect to maintain the equalized assessed value (EAV) of their home at the base year value and prevent any increase due to inflation. The base year generally is the year prior to the year you first qualify and apply for the exemption.

The assessment freeze homestead exemption does not freeze the amount of your property tax bill, which could increase if the tax rate increases. Your assessment and tax bill may also increase if you add improvements to your home. However, if the equalized assessed value of your home decreases in the future, you will benefit from any reduction.

Note Taxable year is the year preceding the year in which the property taxes are billed.

Who is eligible?

To qualify for the senior citizens assessment freeze homestead exemption for the 2004 taxable year, you must

- be 65 years of age or older during this taxable year, and
- have a total household income of no more than \$40,000 in 2003.

In addition, on January 1, 2004, you must

- have used the property as your principal place of residence,
- have owned the property, or had a legal or equitable interest in the property by a written instrument, or had a leasehold interest in the property used as a single-family residence, and
- be liable for the payment of property taxes.

Note If this is the first time you are applying for this exemption, you also must meet the last three eligibility requirements listed above on January 1, 2003.

You do not qualify for this exemption if your property is assessed under the mobile home privilege tax.

If your spouse died in 2004 and would have qualified for the exemption in 2004, and you meet all of the above requirements except the age requirement, you are eligible for this exemption in 2004 and possibly in 2003. For more information, contact your chief county assessment officer (CCAO), also known as the supervisor of assessments or the county assessor, whose address and phone number are printed at the bottom of Page 2.

If you previously received this exemption and now reside in a nursing home and if your property is unoccupied, or is occupied by your spouse, you may be eligible if the other requirements are met.

Residents of cooperative apartment buildings or cooperative life-care facilities may qualify for this exemption if they are liable for the payment of property taxes on their residence and meet the other eligibility requirements.

What is a household?

A household means the applicant, the applicant's spouse, and all persons who use the residence of the applicant as their principal dwelling place on January 1, 2004.

What is included in household income?

Household income includes your income, your spouse's income (unless divorced), and the income of all individuals living in the household. Some examples of income that must be included in your household income (For specific questions, see Part 2 on Page 4)

- alimony received
- annuity benefits
- Black Lung benefits
- business income
- capital gains

- cash assistance from Human Services and other governmental cash public assistance
- cash winnings from such sources as raffles and lotteries
- Civil Service benefits
- damages awarded in a lawsuit for nonphysical injury or sickness
- dividends
- farm income
- interest
- interest received on life insurance policies
- lump sum Social Security payments
- miscellaneous income, such as from rummage sales, recycling aluminum, or baby sitting
- military retirement pay based on age or length of service
- monthly insurance benefits
- pension and IRA benefits (federally taxable portion only)
- Railroad Retirement benefits (including Medicare deductions)
- rental income
- SeniorCare rebate (only if you took an itemized deduction for health insurance in the prior year)
- Social Security income (including Medicare deductions)
- Supplemental Security Income (SSI) benefits
- unemployment compensation
- wages, salaries, and tips from work
- Workers' Compensation Act income
- Workers' Occupational Diseases Act income

What is not included in household income?

Some examples of income that are not included in household income (For specific income questions, see Part 2 on Page 4)

- alimony paid
- cash gifts
- child support payments
- Circuit Breaker grants
- damages awarded from a lawsuit for a physical personal injury or sickness
- Energy Assistance payments
- federal income tax refunds
- IRA's "rolled over" into other retirement accounts, unless "rolled over" into a Roth IRA
- lump sums from inheritances
- lump sums from insurance policies
- money borrowed against a life insurance policy or from any financial institution
- spousal impoverishment payments
- stipends from the Foster Parent and Foster Grandparent programs
- Veterans' benefits

What if I have a net operating loss or capital loss carryover from a previous year?

You cannot include any carryover of net operating loss or capital loss from a previous year. You can include only a net operating loss or capital loss that occurred in 2003.

Will my information remain confidential?

All information received from your application is confidential and may be used only for official purposes.

When must I file?

Contact your CCAO to verify the due date for your county.

You must file Form PTAX-340 **every year** to continue to receive the exemption. The eligibility requirements listed under "Who is eligible" must be met each year.

Note Additional documentation (i.e., birth certificates, tax returns, etc.) may be required by the CCAO to verify the information in this application.

What if I need additional assistance?

If you have questions about this form, please contact your CCAO, whose address and phone number are printed at the bottom of Page 2.

Form PTAX-340 Step-by-Step Instructions

Part 1: Complete the following information

Type or print your name, address, Social Security number, date of birth, and phone number.

Lines 1 through 5 — Follow the instructions on the form.

Part 2: Complete the 2003 income information for the entire household

"Income" for this exemption (320 ILCS 25/3.07) means 2003 federal adjusted gross income, **plus** certain items subtracted from or not included in your federal adjusted gross income. These include tax-exempt interest, dividends, annuities, net operating loss carryovers, capital loss carryovers, and Social Security benefits. Income also includes public assistance payments from a governmental agency, Supplemental Security Income, and certain taxes paid. These step-by-step instructions provide federal return line references and reporting statement references, whenever possible.

The amounts written on each line must include your 2003 income and the income of **all** the individuals living in the household.

Line 1 — Social Security and Supplemental Security Income (SSI) benefits

Write the total amount of any retirement, disability, or survivor's benefits (including Medicare deductions) the entire household received from the Social Security Administration. (Shown in box 3 of Form SSA-1099.) You must also include any Supplemental Security Income (SSI) the entire household received and any benefits to dependent children in the household. Do not include reimbursements under Medicare/Medicaid for medical expenses.

Note The amount deducted for Medicare (\$704.40 yearly or \$58.70 per month, per person) is already included in the amount in box 3 of Form SSA-1099.

Line 2 — Railroad Retirement benefits

Write the total amount of any retirement, disability, or survivor's benefits (including Medicare deductions) the entire household received under the Railroad Retirement Act. (Shown on Forms SSA-1099 and RRB-1099.)

Line 3 — Civil Service benefits

Write the total amount of any retirement, disability, or survivor's benefits the entire household received under any Civil Service retirement plan. (Shown on Form 1099-R.)

Line 4 — Other pensions and annuity benefits

Write the total amount of income the entire household received as an annuity from any annuity, endowment, life insurance contract, or similar contract or agreement. (Shown on Form 1099-R.)

Include only the federally taxable portion of pensions, IRAs, and IRAs converted to Roth IRAs. (Shown on U.S. 1040, Line 15b and 16b, or U.S. 1040A, Line 11b and 12b.) IRA's are not taxable when "rolled over," unless "rolled over" into a Roth IRA.

Line 5 — Human Services and other governmental cash public assistance benefits

Write the total amount of Human Services and other governmental cash public assistance benefits the entire household received. If the first two digits of any member's Human Services case number are the same as any of those in the following list, you must include the total amount of any of these benefits on Line 5.

- 01 aged
- 02 blind
- 03 disabled

- 04 and 06 temporary assistance to
needy families (TANF)
- 07 general assistance

To determine the total amount of the household benefits, multiply the monthly amount each person received by 12. You must adjust your figures accordingly if anyone in the household did not receive 12 equal checks during this period.

Food stamps, medical assistance, and Circuit Breaker benefits anyone in the household may have received are not considered income and should not be added to your total income.

Line 6 — Wages, salaries, and tips from work

Write the total amount of wages, salaries, and tips from work for every household member. (Shown in box 1 of Form W-2.)

Line 7 — Interest and dividends received

Write the total amount of all interest and dividends the entire household received from all sources, including any government sources. (Shown on Forms 1099-INT, 1099-OID, and 1099-DIV.) You must include both taxable and nontaxable amounts.

Line 8 — Net rental, farm, and business income or (loss)

Write the total amount of any net income or loss from rental, farm, business sources, etc., the entire household received, as allowed on U.S. 1040, Lines 12, 17, and 18. You **cannot** use any net operating loss (NOL) carryover in figuring income.

Line 9 — Net capital gain or (loss)

Write the total amount of any taxable capital gain or loss the entire household received in 2003, as allowed on U.S. 1040, Lines 13a and 14, or U.S. 1040A, Line 10a. You **cannot** use a net capital loss carryover in figuring income.

Line 10 — Other income or (loss)

Write the total amount of any other income or loss not included in Lines 1 through 9, that is included in federal adjusted gross income, such as alimony received, unemployment compensation, taxes withheld from oil or gas well royalties. You **cannot** use any net operating loss (NOL) carryover in figuring income.

Line 11 — Add Lines 1 through 10.

Line 12 — Subtractions

You may subtract only the reported adjustments to income totaled on U.S. 1040, Line 33 or U.S. 1040A, Line 20. For example

- educator expenses
- IRA deduction
- student loan interest deduction
- tuition and fees deduction
- Archer MSA deduction
- moving expenses
- one-half of self-employment tax
- self-employed health insurance deduction
- self-employed SEP, SIMPLE, and qualified plans
- penalty on early withdrawal of savings
- alimony paid

Line 13 — Total household income

Subtract Line 12 from Line 11. If this amount is greater than \$40,000, **you do not qualify for this exemption.**

Part 3: Complete this affidavit

Lines 1 through 6 — Read the affidavit carefully. The statements must apply.

Line 7 — Write the names and Social Security numbers of the individuals, in addition to yourself, who used the property for their principal residence on January 1, 2004. Attach an additional sheet if necessary.

Line 8 — Follow the instructions on the form. If your spouse does not reside at this property, be sure to write his or her address.

Note You must sign your Form PTAX-340 and have it notarized before filing with your CCAO. Return your completed Form PTAX-340 to your CCAO at the address printed on the bottom of Page 2.